



## Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact [support@jstor.org](mailto:support@jstor.org).

# READJUSTMENTS IN THE TRAINING SCHOOL CURRICULUM TO MEET THE NEW DEMANDS IN PUBLIC HEALTH NURSING<sup>1</sup>

BY ISABEL M. STEWART, R.N.

*Teachers College, New York, N. Y.*

The general system of theoretical and practical training which is used in most of our training schools to-day, was worked out a good many years ago, before Public Health Nursing, as we now understand it, had really come into being. The training was established first of all to meet the needs in hospitals. If the pupil nurses were able to do the every-day work of the various hospital departments in a satisfactory way and if, on graduation, they were able to adapt themselves fairly well to the care of sick patients in private homes, it has usually been assumed that the course of training was all that could be desired. A few nurses have always gone into executive work in institutions, and up to the last ten or fifteen years a very few into visiting nursing and other special branches, but it had never been considered necessary or advisable to change the regular course of training in any way to meet the needs of this relatively small group.

The recent rapid development of visiting nursing and other branches of public health work has brought us face to face with a new problem in nurse training. In the first place we are asked to produce more nurses for this field, and we are asked also to fit them more specifically for it. There can be no question that nurses have on the whole made good in public health work, but they themselves are the first to admit that they have not measured up to all the possibilities or requirements of the new job. Some of them have taken post-graduate courses to better fit themselves for such work, but the majority have had to plunge in and find themselves as best they could. The general opinion seems to be that the usual hospital training does not entirely prepare them for these branches of work. This opinion comes not only from nurses, but from prominent health experts and from people in various branches of social and community work, where numbers of nurses are employed.

How, then, are public health nurses to be trained? There has been a great deal of discussion of this question in recent years, and it has been rather hard to come to any definite conclusion as to just what the training in public health should include, but one thing seems

<sup>1</sup>Read at a meeting of the Ohio State Nurses' Association, Toledo, May 5-7, 1919.

to be clear, and that is that the training in bed-side care of the sick is not enough. In all public health work the emphasis must necessarily be on prevention, while in the hospital the main emphasis seems to center on disease and its treatment. In the hospital the nurse concerns herself mainly with the sick patient, while the public health nurse must concern herself quite as much with the family and the community.

The roots of disease are usually found in bad housing, inadequate food, over work and a hundred other causes which cannot be reached by disinfectants or drugs, or even by good drainage and clean streets. If the nurse is to help in the prevention of disease, she has to get back to the insanitary conditions which produce disease, and this is where the previous training of the nurse is likely to be most defective. The public health nurse is primarily and essentially a teacher, and though she may do a great deal of actual nursing work too, she is successful in proportion as she carries the message of health and disease prevention into the home and community. To make this educational work effective, the nurse must be able to get her message over, both to individuals and groups. She has to secure the support and coöperation of the citizens in her community, and she has to help organize and direct their efforts in the right way.

Some nurses have naturally, or have acquired, the qualities of initiative and leadership which command the respect and confidence of people, and a few have the knowledge and experience in teaching which enables them to carry on this educational work successfully, but it is scarcely to be expected that many will be found who have the knowledge and the training ready-made for this kind of work. This means that somewhere and somehow they must get the preparation they need. There are three ways suggested for giving this training: (1) through post-graduate courses superimposed on the regular nurses' training; (2) through undergraduate courses which might be included in the last year of the regular nurses' training; (3) through a different system altogether which would differentiate strictly between the public health nurses and others from the beginning, which would include only a minimum of the kind of experience and bedside nursing which we now believe necessary for the training of a nurse, and which would put the main emphasis on the social, sanitary and educational features of which we have spoken.

The latter suggestion, which is being urged by some public health experts, does not seem to meet with much approval from nurses. Many of them feel that the sacrifice of the practical training and discipline and the long and intimate experience with disease would be a serious loss. In public health work these have really been the

greatest assets the nurse has had. However, even if a satisfactory course of a different type can be worked out, it will be some time before it will take the place of the present system, and in the meantime we have to do what we can with the resources available.

The post-graduate courses are, of course, useful and necessary, and it would be expected that all graduate nurses who can do so would avail themselves of such training, but it is quite certain that a relatively small proportion will be able to add another year or even a half year to the regular three years' course, before taking up their work in this field. Moreover it has been definitely proved that unless nurses can have some little introduction to this kind of work during their training, they are not very likely to take it up later.

The conclusion, then, would seem to be that whatever fundamental training is to be given to the rank and file of public health nurses must be given to them during their period of training, or at least within the three years' period which is usually accepted as a reasonable time for a nurse's training. It would, of course, be understood that the hospital could not attempt to prepare nurses for highly specialized branches of public health work or for the more responsible positions. All it could hope to do would be to prepare them for the every-day staff work in a visiting nurse association or other public health organization, in the same way that it now prepares nurses to enter private nursing or the less responsible positions in institutional work.

The question now comes as to how far the training school should attempt to modify the regular hospital training to meet the needs of those who expect to go into the public health field. In the first place, the average pupil does not know until she is well on in her training which field of work she wants to enter.

It takes some time for her to discover what her special interests and aptitudes are, and she often changes her mind several times before she decides. In the second place, most of the adjustments in the regular course of training which have been suggested to meet the needs of public health nurses, are just as necessary for other pupils in the training school, and have been repeatedly urged by people who are interested in other branches of nursing work.

The first thing we should all agree upon would be a strengthening of the preparatory training,—especially the training in science. The public health nurse needs a good strong foundation in hygiene and sanitation, in bacteriology, in dietetics and in every subject which bears on the prevention of disease, but so does the private nurse and the teacher and the institutional nurse. On the social side, it seems to be important that every nurse should know something about the

conditions which bring so many of our patients into the hospital and the home problems which so often complicate recovery. Most of us feel that some introduction to these problems should come early in the course for all students. Some will decide at once that this is the field of work they want to enter, and will direct their interest toward that end from the beginning, but whether they do or not, it is good for all of them to see the human and social side of their patient's lives, as well as the medical side.

In the same way the study of psychology, which simply means the study of human nature, should be urged for all nurses irrespective of the line of work they expect to enter. The public health nurse certainly needs all the help she can get in learning how to approach and handle people of all types, and how to get her message over to them, but every pupil in the hospital needs the same help for her every-day work with patients. It seems to me we should put a great deal more emphasis on the teaching of our hospital patients than we do. If the pupil nurse could feel from the beginning that this is part of her work just as much as bathing her patient, the influence of the hospital for health would be much greater, and the nurse would be better prepared to go out as a teacher of health.

In the study of disease itself and its treatment there does not seem to be anything which is given in the regular nurses' training which the public health nurse can afford to miss, though it may be that the length of training in different departments might be adjusted somewhat. In addition to her general medical and surgical training, she certainly needs all the experience she can get with children and with obstetrical cases. A great many of the nurses who come to us for training in public health work have had almost no practical training in communicable diseases. This would seem to be essential. Many will insist that mental work is almost equally important.

The only branch of hospital work which the public health nurse is not likely to use extensively is surgery, and it is suggested that as something has to be sacrificed it should be the operating-room training,—a period in the accident ward or in the out-patients department being substituted. Possibly, also, the period in the surgical wards could be shortened to give more time for dispensary experience which is invaluable for the public health work. Here a student gets the eye, ear, nose and throat work which she needs so much in school or industrial nursing, especially, and the skin and venereal diseases which are also most important. Here she also sees the early and chronic stages of disease which she does not usually meet in the hospital ward. Then if there is a good social service department in operation, she gets a valuable insight into the social as well as the clinical aspects of these conditions.

In the Standard Curriculum we have recommended that at least one lecture should be given in each series on the social aspects of the diseases treated. We realize that it will often be difficult to get people who can give these lectures, but there is no question that public health nurses and all nurses need to know more about these diseases, their causes, and how they affect social and family life. It is also recommended that in the final year all the students should have a series of lectures on modern social conditions; one on public sanitation, and one on fields of nursing work in which all branches of nursing should be represented. In some places these lectures are being given in the evenings to the senior pupils from several training schools, so that all will have a chance to attend, even though they may be taking affiliated courses at the time.

It is assumed that by the final year the pupil will know what kind of work she is most interested in, and her superintendent and teachers will also know something about her aptitude and possibilities. It is advisable that at least half of the time during the third year should be spent in work which is pretty definitely directed toward one of the main branches of private, institutional or public health nursing. If the hospital does not have the facilities for giving this broader training, and if it cannot arrange for affiliation for its students, it would seem to be best to offer simply a two years' training and let the student make her own arrangements for the further courses which she needs to round out her preparation.

The usual way is for the training school to secure these advantages through affiliation with a neighboring visiting nurse association, but many hospitals have in their own out-patients' department very good facilities for giving practical experience in the handling of both public health and social problems, if these could be developed. If arrangements could be made to secure home visiting social case work under good supervision, accompanied by systematic teaching, there would seem to be excellent possibilities for giving this training within the hospital itself.

Whether given here or in a visiting nurse association, it is essential in all such work that the standards of nursing shall be good, and that the student shall be taught not only how to care for the sick in their homes, but how to observe sanitary and social conditions; how to work out family problems with the various coöperating agencies, and how to teach the people in their homes. In some of the courses offered, an opportunity is given to work for a short time with the charity organizations in order to understand better the principles and methods of relief and social work. Sometimes a few days can be spent in several of the various forms of public health work such as

that in milk stations or schools or prenatal clinics. In any case, visits should be made to other organizations and institutions where special health and social problems are being worked out.

This period of training should not be less than four months, and if at all possible, should be eight months. Even then it would not be possible to prepare the student for more than the general field of public health nursing. That is, she would not be a specialist in any sense of the word, but would simply have the point of view and the fundamental technique which would admit her to the general field work.

Most of the student's time during this period of training is spent in practical work in the homes. The theoretical work usually covers from four to eight hours a week and includes lectures, classes and conferences with supervisors. The students at Teachers College have their practical work with the Henry Street Settlement and their theoretical work at the college. Here they have one course in the principles of public health nursing, one in the principles of social case work, and one in home economics as applied to visiting nurse work. This includes a study of foods, clothing, housing, etc., in relation to the family budget.

There are, of course, many other things which it would be well for them to have, but the period is short, and they cannot absorb a great deal more unless their practical work in the field can be reduced. The present plan is to get this practical work down to about twenty-four hours a week. If the student nurse could spend eight months, more ground could be covered and she would get a much sounder foundation. It would seem that at least half of that time should be given to pretty intensive theoretical work, and the rest to the practical work in the field. It is expected that if students find the work interesting and wish to go further in it they will come back and prepare for positions as organizers, supervisors, teachers or specialists in some of the public health branches.

The cost of such courses is becoming a rather difficult problem. It does not seem reasonable to ask the hospital to maintain the student and to pay for her tuition during this period of training if she is not giving any service to the hospital. The visiting nurse associations have been bearing the cost in many places, but they find it an increasingly heavy burden, especially with the cost of teaching added. It does not seem unreasonable to ask the student nurse to begin to share this cost, and it is believed that many of them would be willing and able to do this. Scholarships or loans might be provided for those who show aptitude, and who cannot afford to pay for the training.

It seems wise to limit such courses to those who really show some fitness and who expect to follow public health work for at least a year or two. Of course the experience is good for any nurse, but the opportunities for training are limited, and since the whole object is to get more well-trained nurses into the field of public health nursing, we should concentrate all our efforts toward this end. When the affiliation is first made with a visiting nurse association, it may be necessary to urge pupils to take advantage of the training, but as the work becomes better known, it is likely to become quite popular and a more careful selection can be made.

It is constantly urged that the very best type of nurse is needed for public health work. She must have an attractive personality, broad education, good intelligence, executive ability and strong qualities of leadership. We will all agree that these qualities are needed, but we insist that they are just as necessary for the teacher or head nurse, and, indeed, for the private nurse as well. It simply means that we must get better women into the nursing field, and we must bring out those qualities as far as possible through the training we give them. We must see what we can do to eliminate some of the routine ward work, and shorten the hours so that our pupils may have more time for reading, observation and study. We need to provide more social life and better opportunity for developing leadership through self government and through outside activities which will train our nurses in speaking, in writing and in working together.

A great deal of the student's time which should be spent in getting familiar with the symptoms of disease and in actually caring for sick patients is at present wasted in the useless repetition of household procedures which a good maid could handle perfectly well. There is no question but that as much educational work could be accomplished in two months as is usually accomplished in four, if the hospital could concentrate more on the things the pupil actually needs, and if there were, in addition to the regular head nurses whose duties are largely administrative, ward teachers who would help the pupils pick out the things in their ward experience which are significant and educational.

With this clinical kind of teaching conducted by both nurses and doctors, more could be gotten out of two years' training than is now accomplished in three. It would, however, mean a greater cost to the hospital and a different adjustment of the hospital work, and it would seem to be impossible to do much to bring about this change until we can secure independent endowments for training schools.

In conclusion let me repeat that while somewhat radical adjustments in our present system of training are unquestionably needed to



meet the demands in the Public Health Nursing field, the need for adjustments and improvements is felt just about as keenly in other important branches of nursing work. It would seem that the fundamental training for all these branches, while not identical, should nevertheless, be very similar in all essential features, and that this fundamental training should take at least two years, as our work is at present organized. If a third year of training is given, most of us feel now, that it should provide for some differentiation in both experience and subject matter, according as the student is preparing for institutional, public health or private work. At present it does not seem possible to give more than an introduction to these special fields. It may be that eventually the training school will turn over all of this work, or a good part of it to other educational institutions which have better facilities for giving it. At least one term of four months should be allowed for any such course and if at all possible, a full academic year. If the hospital cannot itself supply a really satisfactory training, and cannot make the necessary affiliation for it, it would seem to be only fair that the student should be released from her training school from four to eight months before the end of her course, providing she is willing to take the training at her own expense.

This policy has been definitely recommended by the National League of Nursing Education, and the training schools all over the country have been asked to help in furthering it. If we all put our very best thought and effort to the solving of this question, there can be no doubt that we shall be able very soon to supply the workers needed and that we can build up a kind of training which will fit them much better than our present training does, for the work they have to do.

It is the greatest encouragement to know that a serious study is soon to be made of this whole question under the auspices of the Rockefeller Foundation, and we shall then have more facts, and shall be in a much better position to decide what our future policy is to be. Our biggest difficulty in the whole field of nursing education is an economic one, and if that difficulty can be removed, it is quite certain that we can proceed much more rapidly in the working out of a satisfactory solution.